## Interim Designation of Agent to Receive Notification of Claimed Infringement

Full Legal Name of Service Provider: Sun Valley Cable Vision, Inc	
Alternative Name(s) of Service Provider (including all names under which the sprovider is doing business):	servic ——
Address of Service Provider: 1400 Lake Hearn Drive, NE, Atlanta, GA 303	19
Name of Agent Designated to Receive  Notification of Claimed Infringement: Wanda Moore	<del></del> .
Full Address of Designated Agent to which Notification Should be Sent (a P.O. Bo or similar designation is not acceptable except where it is the only address that can be used in the geograp	ox hic
location): 1400 Lake Hearn Drive, NE, Atlanta, GA 30319	
Telephone Number of Designated Agent: 404-843-5000	
Facsimile Number of Designated Agent: 404-843-5845	<del></del>
Email Address of Designated Agent: copyright-abuse@cox.com	
Si of Officer or Representative of the Designating Service Provider:  Date: (0-13-0)	· · ·
Typed or Printed Name and Title: Wanda Moore, Paralegal	
Note: This Interim Designation Must be Accompanied by a \$20 Filing Fee Made Payable to the Register of Copyrights.	

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